

AMENDMENTS TO THE DRAWINGS

Please replace Figures 1 and 2 with Replacement Figures 1 and 2, without prejudice or disclaimer to continued examination on the merits.

REMARKS

This Amendment and Response to Non-Final Office Action is being submitted in response to the non-final Office Action mailed June 15, 2005. Claims 1-24 are pending in the Application. Claims 1-24 stand objected to for containing informalities and rejected under 35 U.S.C. 102(b) as being anticipated by Fellegara et al. (U.S. Patent No. 5,592,374).

In response to these objections and rejections, the Specification, the Drawings, and Claims 1-24 have been amended to further clarify the subject matter which Applicants regard as the invention. These amendments are fully supported in the Specification, Drawings, and Claims of the Application and no new matter has been added. Based upon the amendments, reconsideration of the Application is respectfully requested in view of the following remarks.

Objection to Claims 1-24:

Claims 1-24 stand objected to for containing informalities. Specifically, Examiner indicates that claim number formats [c01], [c02], etc. are improper and should be removed.

In response to this objection, these claim number formats have been removed.

Therefore, Applicants submit that the objection to Claims 1-24 for containing informalities has been overcome and respectfully request that Examiner withdraw this objection.

Amendments to the Specification and the Drawings:

It should be noted that new reference numbers have been added to various paragraphs of the Specification and to the Drawings (see Replacement Figures 1 and 2) in order to remove duplicative reference numbers. Applicants apologize for this initial oversight.

Rejection of Claims 1-24 Under 35 U.S.C. 102(b) – Fellegara et al.:

Claims 1-24 stand rejected under 35 U.S.C. 102(b) as being anticipated by Fellegara et al. (U.S. Patent No. 5,592,374). Specifically, regarding independent Claims 1, 10, and 18, Examiner indicates that Fellegara et al. disclose a patient identification and x-ray exam data collection system (see Abstract; column 3, lines 13+) that includes a patient barcode (see column 3, lines 18+) encoded with patient information that may be read into a header file (see column 2, lines 33+; column 3, lines 56-62). Examiner also indicates that a medical imaging device is adjusted based upon this patient information, which may be selectively changed (see column 2, lines 46-61; column 5, lines 3-14).

Fellegara et al., however, do not disclose or suggest the use of a medical imaging system equipped with *programming* for *automatically* selecting an optimal *data acquisition protocol*, wherein the medical imaging system reads information from the programmable identification tag and then the programming *automatically* selects an optimal *data acquisition protocol* based, at least in part, on the predetermined information about the patient that is stored in the programmable identification tag, as recited in amended Claims 1, 10, and 18.

Rather, Fellegara et al. disclose a system for *matching patient x-ray exam data with a previously-acquired patient x-ray image* (see Abstract). Specifically, column 2, lines 46-61, cited by Examiner and referring to U.S. Patent Application No. 981,144 to Godlewski et al. (abandoned and continued in U.S. Patent No. 5,551,428), disclose

associating patient information with one or more previously-acquired medical images such that each may be, to some extent, customized and directed to a pre-selected destination (see Abstract; column 1, lines 7-13). Likewise, column 5, lines 3-14, cited by Examiner, disclose scanning exam-related x-ray information from a barcode associated with an x-ray generator and, for example, previously-entered instructions related to how an image should be taken.

In other words, the system of the present invention is intelligent and is capable of processing information that it receives from a patient ID tag to formulate an image acquisition protocol, automatically and independent of any operator intervention. The systems of the references, however, simply associate information with one or more images, or provide very basic information that an operator can then use, independent of the system, to formulate an image acquisition protocol or reformat one or more images. These systems still require extensive operator intervention.

It should be noted that Examiner has offered no meaningful rejection of Claim 9, related to a monitor associated with the patient ID tag for actually measuring physical parameters of interest, as opposed to simply recording them.

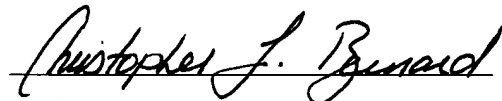
Because Claims 1, 10, and 18 recite elements/limitations not disclosed by Fellegara et al., Applicants submit that the rejection of Claims 1, 10, and 18 under 35 U.S.C. 102(b) has been overcome and respectfully request that the rejection be withdrawn. Likewise, because Claims 2-9, 11-17, and 19-24 are dependent from Claims 1, 10, and 18, Applicants submit that the rejection of Claims 2-9, 11-17, and 19-24 under 35 U.S.C. 102(b) has also been overcome and respectfully request that the rejection be withdrawn.

CONCLUSION

Applicants would like to thank Examiner for the attention and consideration accorded the present Application. Should Examiner determine that any further action is necessary to place the Application in condition for allowance, Examiner is encouraged to contact undersigned Counsel at the telephone number, facsimile number, address, or email address provided below. It is not believed that any fees for additional claims, extensions of time, or the like are required beyond those that may otherwise be indicated in the documents accompanying this paper. However, if such additional fees are required, Examiner is encouraged to notify undersigned Counsel at Examiner's earliest convenience.

Respectfully submitted,

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